

Application Data Sheet

Application Information

Application number::	
Filing Date::	August 25, 2003
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	Paper
Computer Readable Form (CRF)?::	YES
Number of copies of CRF::	1
Title::	Method for the Preparation of Growth Hormone and Antagonist Thereof Having Lower Levels of Isoform Impurities Thereof
Attorney Docket Number::	161765.00520
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Suggested Drawing Figure::	2
Total Drawing Sheets::	2
Small Entity?::	NO
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	NO

Applicant Information

Applicant Authority Type:: inventor
Primary Citizenship Country:: IN
Status:: Full Capacity
Given Name:: Anurag
Middle Name:: S.
Family Name:: Rathore
Name Suffix::
City of Residence:: Thousand Oaks
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 257 Green Lea
City of mailing address:: Thousand Oaks
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 91361

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Stephen
Middle Name:: B.
Family Name:: Lyle
Name Suffix::
City of Residence:: Marcellus
State or Province of Residence:: MI
Country of Residence:: US
Street of mailing address:: 13820 Fflowerfield Road
City of mailing address:: Marcellus

State or Province of mailing address:: MI
Country of mailing address:: US
Postal or Zip Code of mailing address:: 49067

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name:: E.
Family Name:: Steinmeyer
Name Suffix::
City of Residence:: Clarkson Valley
State or Province of Residence:: MO
Country of Residence:: US
Street of mailing address:: 1645 Trotting Trail
City of mailing address:: Clarkson Valley
State or Province of mailing address:: MO
Country of mailing address:: US
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Scott
Middle Name:: I.
Family Name:: Allen
Name Suffix::
City of Residence:: St. Peters
State or Province of Residence:: MO
Country of Residence:: US

Street of mailing address:: 5 Lost Dutchman Court
City of mailing address:: St. Peiers
State or Province of mailing address:: MO
Country of mailing address:: US
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: John
Middle Name::
Family Name:: Meyer
Name Suffix::

City of Residence:: Ellisville
State or Province of Residence:: MO
Country of Residence:: US
Street of mailing address:: 16251 Castlerea Blvd.

City of mailing address:: Ellisville
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Country of mailing address:: US
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Denis
Middle Name:: M.
Family Name:: Boyle
Name Suffix::

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State or Province of Residence:: MO
Country of Residence:: US
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Country of mailing address:: US
Postal or Zip Code of mailing address:: 63357

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: John
Middle Name:: J.
Family Name:: Buckley
Name Suffix::
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State or Province of Residence:: MO
Country of Residence:: US
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City of mailing address:: Ofallon
State or Province of mailing address:: MO
Country of mailing address:: US
Postal or Zip Code of mailing address:: 63366

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Gary
Middle Name:: V.

Family Name:: Johnson
 Name Suffix::
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 State or Province of Residence:: MO
 Country of Residence:: US
 Street of mailing address:: 4 Westford Court
 City of mailing address:: St. Charles
 State or Province of mailing address:: MO
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 63304

Correspondence Information

Correspondence Customer Number:: 22907

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/406,553	08/28/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assign e Information

Assignee name::	Pharmacia Corporation
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